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Bib Data Sheet

CONFIRMATION NO. 6000

SERIAL NUMBER 09/528,989	FILING OR 371(c) DATE 03/20/2000 RULE	CLASS 424	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. 9676-292
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## APPLICANTS

Jean Marie Vogel, Boxborough, MA;  
Egisto Boshetti, Croissy sur seine, FRANCE;  
Richard Thomas, Lincoln, MA;

## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
\*\* 05/27/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 2	TOTAL CLAIMS 51	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

## ADDRESS

20582

## TITLE

INJECTABLE AND SWELLABLE MICROSPHERES FOR TISSUE BULKING

FILING FEE RECEIVED 689	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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